


09/23/99

Please type a plus sign (+) inside this box → PTO/SB/05 (4/98)
Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No. Levy 2R
First Inventor or Application Identifier Kenneth L. Levy
Title Method And Apparatus For Robust Usage Of Embedded Data
Express Mail Label No. EM441817611US**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ * Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☒ Specification [Total Pages 34]
(preferred arrangement set forth below)
- Descriptive title of the Invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to Microfiche Appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
3. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 5]
4. Oath or Declaration [Total Pages]
- a. ☐ Newly executed (original or copy)
 - b. ☐ Copy from a prior application (37 C.F.R. § 1.63(d))
(for continuation/divisional with Box 16 completed)
 - i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting
inventor(s) named in the prior application,
see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

**NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY
FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT
IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).**ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

5. ☐ Microfiche Computer Program (Appendix)
6. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
- a. ☐ Computer Readable Copy
 - b. ☐ Paper Copy (identical to computer copy)
 - c. ☐ Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

7. ☐ Assignment Papers (cover sheet & document(s))
8. ☐ 37 C.F.R. § 3.73(b) Statement ☐ Power of
(when there is an assignee) ☐ Attorney
9. ☐ English Translation Document (if applicable)
10. ☒ Information Disclosure ☒ Copies of IDS
Statement (IDS)/PTO-1449 ☒ Citations
11. ☐ Preliminary Amendment
12. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
13. ☒ * Small Entity ☒ Statement filed in prior application,
Statement(s) ☒ Status still proper and desired
(PTO/SB/09-12)
14. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
15. ☒ Other: Assignment Application

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: / Prior application information: Examiner Group / Art Unit: **For CONTINUATION or DIVISIONAL APPS only:** The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.**17. CORRESPONDENCE ADDRESS**☐ Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)

or ☒ Correspondence address below

Name	<u>Kenneth L. Levy</u>				
	<u>AIPL</u>				
Address	<u>110 NE Cedar Street</u>				
City	<u>Stevenson</u>	State	<u>WA</u>	Zip Code	<u>98648</u>
Country	<u>USA</u>	Telephone	<u>509-427-5374</u>	Fax	<u>509-427-7101</u>

Name (Print/Type)	<u>Kenneth L. Levy</u>	Registration No. (Attorney/Agent)	
Signature	<u>[Signature]</u>	Date	<u>9/22/99</u>

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Docket # Levy 2R

Certificate of Mailing by "Express Mail" (37 CFR 1.10)

Applicant: Kenneth L. Levy
Serial Number: To be assigned
Filing Date: To be assigned
Examiner: To be assigned
Title: METHOD AND APPARATUS FOR ROBUST EMBEDDED DATA



I hereby verify that this provisional patent application and fee is being deposited with the U.S. Postal Service via "Express Mail Post Office to Addressee, under 37 CFR 1.10, on Sept. 23, 1999, and is addressed to the Assistant Commissioner for Patent, Washington, D.C. 20231.

Amy M. Weissfeld

(Typed or Printed Name of Person Mailing Correspondence)

Amy M. Weissfeld

(Signature of Person Mailing Correspondence)

EM441817611US

("Express Mail" mailing Label Number)

09/23/99 "Express Mail"

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<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 1999</h2> <p style="font-size: small; margin: 0;">Patent fees are subject to annual revision. Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.</p>		<p>Complete if Known</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td style="width: 50%;"></td> </tr> <tr> <td>Filing Date</td> <td>Sept 23, 1999</td> </tr> <tr> <td>First Named Inventor</td> <td>Kenneth L. Levy</td> </tr> <tr> <td>Examiner Name</td> <td></td> </tr> <tr> <td>Group / Art Unit</td> <td></td> </tr> <tr> <td>Attorney Docket No.</td> <td>Levy 2R</td> </tr> </table>		Application Number		Filing Date	Sept 23, 1999	First Named Inventor	Kenneth L. Levy	Examiner Name		Group / Art Unit		Attorney Docket No.	Levy 2R
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TOTAL AMOUNT OF PAYMENT (\$)		539													

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)																																																																																																																																																																														
<p>1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</p> <p>Deposit Account Number </p> <p>Deposit Account Name </p> <p><input type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p>	<p>3. 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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Kenneth L. Levy	Registration No. (Attorney/Agent)	Telephone 509-421-5374
Signature	<i>Kenneth L. Levy</i>	Date	9/23/99

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